PTO/SB/06 (12-04)

Approved for use through 7/31/2008, CMB 0651-0032

U.S. Patent and Trademert Office; U.S. DEPARTMENT OF CONMERCE Under the Paperwork Reduction Act of 1995, no persons are required to except to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD or Docket Number Substitute for Form PTO-875 Effective December 8, 2004 075528 APPLICATION AS FILED - PART I OTHER THAN OR SMALL ENTITY (Column 1) (Column 2) SMALL ENTITY FOR NUMBER FLED NUMBER EXTRA RATE (1) FEE ( RATE (S) FEE (3) BASIC FEE NA NIA N/A 150.00 ·N/A 300.00 (37 CFR 1 15(4), (b), or (c)) SEARCH FEE NA NA NIA \$250 ·NA (37 C≠R.1 10(N). (I). or (m))\* \$500 EXAMINATION FEE NA NIA N/A \$100 (37 CFR 1 16(a). (b), or (a)) NA \$200 TOTAL CLAIMS XS 25 (37 OFR 1 16(i)) :-nia 20 = X\$50 OR INDEPENDENT CLAIMS X100 X200 (37 CFR 1 16(h)) If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each (37 CFR 1 16(s)) additional 50 sheets or traction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). +180= +360= MULTIPLE DEPENDENT CLAIM PRESENT (37 OFR 1.16(i)) \* If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAMS HIGHEST REMAINING PRESENT NUMBER RATE (\$) ADOI-RATE (\$) ADDI-**AFTER** PREVIOUSLY EXTRA TIONAL TIONAL AMENDMENT PAID FOR FEE (\$) FEE (\$) Total Minus X\$ 25 X\$50 OR Independent Minus X100 200.00 X200 ũ OR Application Size Fee (37 CFR 1.16(s)) PRIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,160) +180= +360= OR TOTAL TOTAL 200.00 OR ADD' FFF ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING PRESENT Ф NUMBER RATE (S) ADDI-RATE (1) ADDI-AFTER PREVIOUSLY EXTRA TIONAL TIONAL **AMEHOMENT** PAID FOR FEE (\$) FEE (\$) Total Minus ENDME X\$ 25 G7 CFR 1.18(0) X\$50 OR Independent Of CFR 1.100 () Minus X100 X200 OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (37 CFR 1.160) +360= +180= OR TOTAL TÖTAL ADD'L FFF ADO'L FEE

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

con the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office; U.S.; Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. B x 1450, Alexandria, VA 22313-1450.

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write 70 in column 3.

The Highest Number Previously Pald For (Total or Independent) is the highest number found in the appropriate box in column 1. lids obtain of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application, Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. uding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments